



FEB 03 '05 02:16PM
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PART B - FEE(S) TRANSMITTAL

P.2/6

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25242 7590 11/17/2004

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BROOK KWALICK	(Depositor's name)
<i>[Signature]</i>	(Signature)
2-3-05	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/621.055	07/15/2003	Cesar A. Talledo	IDTL002US1-1826	8820

TITLE OF INVENTION: CLOCK PROCESSING LOGIC AND METHOD FOR DETERMINING CLOCK SIGNAL CHARACTERISTICS IN REFERENCE VOLTAGE AND TEMPERATURE VARYING ENVIRONMENTS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1370	\$0	\$1370	02/17/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
TRA, ANH QUAN	2816	327-284000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).
- ☒ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

INTEGRATED DEVICE TECHNOLOGY, INC. SANTA CLARA, CA

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☐ Publication Fee (No small entity discount permitted)
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- ☐ A check in the amount of the fee(s) is enclosed.
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- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 09-0437 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

[Signature]

Date

JAN-13-2005

Typed or printed name

CHRISTOPHER NOVAK

Registration No.

42,041

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